



Application for Employment

Personal

Date: _____

Name _____
Last First Middle

Present Address _____ Telephone no _____
No. Street City State Zip Code

Position applied for _____ Rate of pay expected _____ (hourly)

Are you interested in: ___ Full time work ___ Part time work

We are open Monday through Saturday. Is there any day of the week you are not able to work? Yes or No

If yes, Please list : _____

Are you 16 years of age or older?..... (Circle) Yes or No

Have you previously applied here?..... (Circle) Yes or No

If yes, Why do you feel you weren't hired? _____

Are there any work experiences, skills, or qualifications that you feel would especially fit you for work here? Please add any additional comments you think are important for us to consider _____

Have you worked in a Veterinary Hospital before?..... (Circle) Yes or No

If yes, What did you do? _____

Are you able to be on your feet for up to 8 hours a day?..... (Circle) Yes or No

Can you tolerate loud noises?..... (Circle) Yes or No

Can you lift at least 50 lbs?..... (Circle) Yes or No

Can you stoop, bend or reach without a problem? (Circle) Yes or No

Office Machines, software programs and computer systems you know how to operate _____

Are you X-Ray certified?..... (Circle) Yes or No

Are you an Oregon Licensed Veterinary Technician?..... (Circle) Yes or No

Are you currently enrolled in a CVT program, Vet Assistant Program or Licensed in another state? Please list: _____

Employment History (Starting with most current employer)

Name of Employer _____ From ___/___/___ to ___/___/___ Salary _____

Address _____ Telephone no _____

Supervisor _____ Position/Duties _____

Reason for leaving _____

Name of Employer _____ From ___/___ to ___/___ Salary _____
Address _____ Telephone no _____
Supervisor _____ Position/Duties _____
Reason for leaving _____

Name of Employer _____ From ___/___ to ___/___ Salary _____
Address _____ Telephone no _____
Supervisor _____ Position/Duties _____
Reason for leaving _____

References (Please list three references that are not related to you)

Name _____ Relationship to you _____ Telephone No _____
Name _____ Relationship to you _____ Telephone No _____
Name _____ Relationship to you _____ Telephone No _____

Affidavit

I hereby certify that I have not knowingly withheld any information that might adversely affect chances for employment and that all information provided is true to the best of my knowledge. Oregon is an "At Will" state and if hired, either party can terminate employment at any time. We are an Equal Opportunity Employer and we do not discriminate on the basis of race, religion, national origin, sex, age, veteran status or disability. It is our intention that all qualified applicants be given equal opportunity and that selection decisions are based on job related factors.

Applicant's Signature _____ Date _____

*** Please attach a Resume with references to this application.